

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Servan Information Solutions, Inc.

THE CORPORATION COMPANY
INTERSTATE PARK DRIVE, SUITE 204
OMERY, AL 36109

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

7-10-07

The Corporation Company

C. Signature

The Corporation Company

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes☐ No

If YES, enter delivery address below:

*alias sum + cmp
07cv608*

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from serv

7006 0100 0003 2054 6068

102595-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt